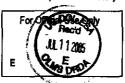
U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 2676	2. Fiscal Year Covered From:		
	1 / 1 / 2004 Through: 12 / 31 / 2004		
3. Name and address of person filing.	Name, file number, and address of labor organization.		
Name Charles N Stewart	Name Transportation Communications Union		
	Labor Organization File Number 000/96		
P.O. Box, Bidg., Room No., if any	P.O. Box, Building and Room Number, if any		
Street 3 Research Place	Street 3 Research Place		
City Rockville	City Rockville		
State Maryland ZIP Code + 4 20850-3279	State Maryland ZIP Code + 4 20850-3279		
5. Position in labor organization. Executive Director, Social Se	rvices		
Enter appropriate data below if, during the past fiscal year, you or your spot (except as specified in the exclu	use or minor child directly or indirectly had any of the following interests sions set forth in the instructions):		
A. Held an interest in, engaged in transactions (including loans) with, or a monetary value from an employer whose employees your organization.			
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.		
Name			
Trade Name, if any:	The second section of the second section secti		
P.O. Box, Bldg., Room No., if any			
F.O. Box, Blog., Noon No., II ally	7.b. Amount.		
Street			
City	All de Annales au sonne au anne a manne quant y 1900 1900 1900 1900 1900 1900 1900 19		
State Other ZIP Code + 4			
Signature			
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)			
Signed Charles 21 Atmat			
Signed Malles / Suman	On 7/5/2005 301-840-8747 Date Telephone Number		
	Date recipione number		

Name of Person Filing Charles Stewart		File Number U- 26	76	
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.				
Name and address of Business (including trade name, if any).	9. Business deals with:			
Name				
Trade Name, if any:	a. Labor Organizat	ion		
P.O. Box, Bldg., Room No., if any	c. Employer			
Street	smeg			
City				
State ZIP Code + 4				
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealir	19.	843	
Name			ver ver per ver len	
Trade Name, if any:	A. O distinct account		d visitation	
P.O. Box, Bldg., Room No., if any				
Street	11.b. Approximate dollar valu	e of such dealing	1	
City	12.a. Nature of interest held		Secretaria de la constanta de	
State ZIP Code + 4	The contract of the contract o			
	12.b. Amount.			
C. Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	r parts A and B above) or other thing of value.			
13.a. Name and address of Employer or Labor Relations Consultant	14.a. Nature of payment.	kara karangan 1994 sa mangan mangan mangan mangan karan karan sa 1990 sa mangan mangan mangan mangan mangan ma		
(including trade name, if any).	Hotel accommodation Privilege conferen			
Name Union Privilege	Liaison. Conference 4/25 & 26/2004.	ce held in Atlan	ta at Hyatt on	
Trade Name, if any: Union Plus				
P.O. Box, Bldg., Room No., if any Suite 300				
Street 1125 15th Street, NW		·	ta de la casa de la ca	
City Washington				
State District of Columbia ZIP Code + 4 20005	, , mention common constituint quad specific proprieta a common constituint and constituin	nga nga garantan ang ang ang ang ang ang ang ang ang a	anneron sena se espera, l'Historia man annoncommuna anneron Veneza e se	
13.b. Is the Business an Employer X or Consultant ?	14.b. Amount of payment.		\$255	

Part C Continuation Page

C. Received from any employer (other than an employer covered under parts A payment of money or other thing of value.	and B above) or from any labor relations consultant to an employer any	
Name and address of Employer or Labor Relations Consultant (including 14.a. Nature of payment.		
trade name, if any).	Dinner in conjunction with a meeting of the Joint	
Name UnitedHealthcare	Plan Committee CRLO Subcommittee, Railroad Employees National Health and Welfare Plan,	
Trade Name, if any:	Jacksonville, Florida, 3/30/2004.	
P.O. Box, Bldg., Room No., if any Railroad Accounts		
Street 450 Columbus Blvd. CT030-13NA		
City Hartford		
State Connecticut ZIP Code + 4 06115-0453		
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment. \$71	
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.		
 Name and address of Employer or Labor Relations Consultant (including trade name, if any). 	14.a. Nature of payment.	
Name Unitedhealthcare	Dinner in conjunction with a meeting of the Joint Plan Committee CRLO Subcommittee, Railroad	
	Employees National Health and Welfare Plan, Hartford, CT, 6/1/2004.	
Trade Name, if any:	Marciota, 61, 6/1/2004.	
P.O. Box, Bldg., Room No., if any Railroad Accounts		
Street 450 Columbus Blvd. CT030-13NA		
City Hartford	and the same of th	
State Connecticut ZIP Code + 4 [06115-0453]		
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment. \$78	
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.		
 Name and address of Employer or Labor Relations Consultant (including trade name, if any). 	14.a. Nature of payment.	
Name UnitedHealthcare	In conjunction with TCU quinquennial convention in Las Vegas, NV, have dinner with Matt MacEwen	
Trade Name, if any:	of UnitedHealthcare, discuss health and welfare plans on 6/23/2004. Wife Sharon also attended,	
Secretaria de la constitución de	had meal of the same value.	
P.O. Box, Bldg., Room No., if any Railroad Accounts	Commission and Commis	
Street 450 Columbus Blvd. CT030-13NA		
City Hartford		
State Connecticut ZIP Code + 4 06115-0453		
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment. \$72	

Part C Continuation Page

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.				
13.a. Name and address of Employer or Labor Relations Consultant (including	14.a. Nature of payment.			
trade name, if any).	Lunch with Mike Mombrea of ValuOptions to discuss			
Name ValueOptions	mental health and substance abuse coverage for the Railroad Employees National Health and			
Trade Name, if any:	Welfare Plan. 8/19/2004.			
P.O. Box, Bidg., Room No., if any Suite 600				
Street 1300 Clay Street	THE			
City Oakland	ALTO MATERIAL STATE OF THE STAT			
State California ZIP Code + 4 94612				
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment. \$25			
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.				
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.			
Name Granzow Consulting Group, Wachovia Securities	Lunch with John Granzow to discuss GA-23111 policy investments. 10/19/2004			
Trade Name, if any:				
P.O. Box, Bldg., Room No., if any Suite 300				
Street 4525 Sharon Road	A. Andrews			
City Charlotte	TO THE PROPERTY OF THE PROPERT			
State North Carolina ZIP Code + 4 28211	March 1807 Company and the 1877 Company and the contract of the 1877 Company and the 1877 Company and the contract of the 1877 Company and the 1877			
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment. \$60			
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.				
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.			
Name Aetna	Lunch with Peter Trusz and Dawn Fairhurst of Aetna to discuss facets of the Railroad Employees			
Trade Name, if any:	National Health and Welfare Plan. 3/16/2004			
P.O. Box, Bidg., Room No., if any				
forments properties of the state of the stat				
Street 7600 A Leesburg Pike	The second secon			
City Falls Church				
State Virginia ZIP Code + 4 22043				
13.b. Is the Business an Employer X or Consultant ?	14.b. Amount of payment. \$45			

Name of Person Fi	ling Charle	s Stewart

File Number U- 2676

Part C Continuation Page

C. Received from any employer (other than an employer covered under parts A payment of money or other thing of value.	and B above) or from any labor relations consultant to an employer any		
13.a. Name and address of Employer or Labor Relations Consultant (including	14.a. Nature of payment.		
trade name, if any).	As CRLO Administrator for Railroad Employees		
Name Unitedhealthcare	National Health and Welfare Plan, attend UnitedHealthcare Customer Advisory Council in		
Trade Name, if any:	Scottsdale, AZ. Hotel and meals paid by United. 9/27-28/2004.		
P.O. Box, Bldg., Room No., if any Railroad Accounts			
Street 450 Columbus Blvd. CT030-13NA	delia variation della variatio		
City Hartford			
State Connecticut ZIP Code + 4 06115-0453			
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment. \$600		
C. Received from any employer (other than an employer covered under parts A payment of money or other thing of value.	and B above) or from any labor relations consultant to an employer any		
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.		
Name	100 M shake a second of the		
Trade Name, if any:	Construction of the Constr		
P.O. Box, Bldg., Room No., if any	TO SERVICE AND		
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Street	TO SERVICE AND ASSESSMENT OF THE SERVICE ASS		
City	· · · · · · · · · · · · · · · · · · ·		
State ZIP Code + 4	111111111111111111111111111111111111111		
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.		
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.			
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.		
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			
City			
State ZIP Code + 4			
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment.		